

Fill	in this informatio	n to identify your ca	ase:										
Deb	otor 1	Rachael Tho	omson			_							
	otor 2 use, if filing)					_							
Unit	ted States Bankr	ruptcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANIA									
Cas	se number 2	21-13186					Chec	k if this is:					
(If kn	own)					■ An amended filing							
							A supplement showing postpetition chapter 13 income as of the following date:						
<u>Of</u>	fficial Forr	<u>m 106l</u>					M	IM / DD/ Y	YYY				
Sc	chedule I	: Your Inc	ome								12/15		
spot	use. If you are s ch a separate sh	eparated and you	are married and not filii r spouse is not filing wi On the top of any additi	th you, do not includ	le inforr	natio	on about	your spo	ouse. If m	ore spa	ce is needed,		
1.	Fill in your em information.	ployment		Debtor 1				Debtor 2 or non-filing spouse					
		more than one job, arate page with about additional	Employment status	■ Employed				☐ Employed					
	information abo		Employment status	☐ Not employed				☐ Not employed					
	employers.		Occupation	Teacher									
	Include part-tim self-employed	ne, seasonal, or work.	Employer's name Chester Upland Scho				strict						
	Occupation ma or homemaker,	y include student , if it applies.	Employer's address	232 W 9th St Chester, PA 19013									
			How long employed the	here? 13 Years	s			_					
Par	t 2: Give I	Details About Mor	nthly Income										
	mate monthly ir use unless you a		ate you file this form. If	you have nothing to re	port for	any l	ine, write	\$0 in the	space. In	clude yo	ur non-filing		
		ng spouse have mo	ore than one employer, co	ombine the information	for all e	emplo	oyers for	that perso	n on the l	ines belo	ow. If you need		
							For Dek	otor 1		btor 2 o			
2.			ry, and commissions (becalculate what the monthl		2.	\$	6.	729.67	\$		N/A		
3.	Estimate and	list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A		

6,729.67

N/A

4. Calculate gross Income. Add line 2 + line 3.

Copy line 4 here 4. \$ 6,729.67 S N/A 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retrement plans 5c. Voluntary contributions 5	Debte	or 1	Rachael Thomson		_	С	ase number (if kn	own)	21-13	186		
Copy line 4 here												
Copy line 4 here							For Debtor 1		For I)ehtor	2 or	
Copy line 4 here List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Noturitary contributions for retirement fund ions 5c. Noturitary contributions for retirement fund ions 5c. Required repayments of retirement fund ions 5c. Required repayments of retirement fund ions 5c. Required repayments of retirement fund ions 5c. Noturitary contributions of retirement fund ions 5c. Noturitary contributions for retirement fund ions 5c. Noturitary contributions for retirement fund ions 5c. Noturitary contributions of retirement fund ions 5c. Noturitary contributions. Specify: 5c. Noturitary contributions. Specify: 6c. Noturitary contributions. Specify: 6c. Add the payroll deductions. Specify: 6c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. \$ 2,112.49 \$ N/A 6c. Voluntary contributions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. \$ 2,112.49 \$ N/A 6c. Voluntary contributions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. \$ 2,112.49 \$ N/A 6c. Voluntary contributions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. \$ 2,112.49 \$ N/A 6c. Voluntary contributions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. \$ 2,112.49 \$ N/A 6c. Voluntary contributions and the form ine 4. 6c. \$ 2,112.49 \$ N/A 6c. Voluntary contributions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. \$ 0.00 \$ N/A 6c. Voluntary contributions that you, a non-filling spouse, or a dependent regularly receive self-tenent, and property self-tenent. 6c. \$ 0.00 \$ N/A 6c. Family support payments that you regularly receive self-tenent. 6c. \$ 0.00 \$ N/A 6c. Pamily support payments that you regularly receive include cash assistance and the value (if known) of any non-cash assistance had be value of known) of any non-cash assistance had be value of known) of any non-cash assistance had be value of known) of any non-cash assistance had be value of known) of any non-cash assistance had be value of known of any non-cash assistance							TOT DEDICT T					
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